

**APPLICATION FOR CERTIFIED COPY OF BIRTH OR DEATH CERTIFICATE**

COLLIN COUNTY CLERK  
200 S. MCDONALD, ANNEX A #120  
MCKINNEY, TX 75069  
[www.collincountytexas.gov](http://www.collincountytexas.gov)  
972-424-1460

**BIRTH** - \$23.00 Each  
NUMBER REQUESTED

\_\_\_\_ Full Size  
\_\_\_\_ Wallet Size

**DEATH**  
NUMBER REQUESTED  
\_\_\_\_ \$21.00 1<sup>st</sup> Certified Copy  
\_\_\_\_ \$ 4.00 each additional copies ordered at this time

Full name on record: \_\_\_\_\_  
First Middle Last

Date of Birth or Death \_\_\_\_\_ County of Birth or Death \_\_\_\_\_

Father's Name: \_\_\_\_\_  
First Middle Last

Mother's Name: \_\_\_\_\_  
First Middle Last (Maiden)

Applicant's Name: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Applicant's Mailing Address: \_\_\_\_\_  
Street City State Zip

Relationship to person named on certificate: \_\_\_\_\_

Purpose for obtaining copy of certificate: Please check all that apply.

\_\_\_\_ Driver License      \_\_\_\_ Housing      \_\_\_\_ Insurance      \_\_\_\_ Passport      \_\_\_\_ Records  
\_\_\_\_ School      \_\_\_\_ Social Security      \_\_\_\_ Travel      \_\_\_\_ Veterans      \_\_\_\_ Welfare

Other, please specify: \_\_\_\_\_

NOTICE: Providing false information on this application is a violation of the law and may lead to fine or imprisonment, or both. The person to whom any certified copy of Birth or Death Record is issued must be a properly qualified applicant. The applicant must have a direct and tangible interest in the record and further, should have a significant legal relationship to the person whose record is requested. The purpose for which the certified copy is needed and the relationship of the applicant to the registrant is essential to determination as to whether or not the person making the request is a properly qualified applicant. (Health and Safety Code, Chapter 678, Sec. 196.003)

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

ID# \_\_\_\_\_ D/O/B \_\_\_\_\_ Expiration \_\_\_\_\_  
(Driver's license, Passport, ID, Etc.)

Mail this application, payment and a photocopy of VALID Driver's License or VALID Government Issued ID

**REQUEST WILL NOT BE PROCESSED WITHOUT ID INFORMATION**

**OFFICE USE ONLY**

Volume \_\_\_\_\_ Page \_\_\_\_\_ Check \_\_\_\_\_ Cash \_\_\_\_\_

Austin File No. \_\_\_\_\_ Money Order \_\_\_\_\_